IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF MISSOURI WESTERN DIVISION

(Write the District and Division, if any, of the court in which the complaint is filed.)

JAMES AARON LOWE	16-3385 CV - S - PDDH - P S. Complaint for Violation of Civil Rights (Prisoner Complaint)
(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	Case No(to be filled in by the Clerk's Office)
-against- CITY OF BRANSON MISSOURI CHEIF OF POLICE CRUTCHER (BRINS BPD OFFICER TRAVIS ROSS	
(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include	

FORMER

addresses here.)

SEE ATTACHED ON BACK

REQUEST FOR TRIAL BY JURY

Plaintiff requests trial by jury. Yes No

BPD SGT KINGSBERRY

BPD OFFICER CALIB TIEG

BPDOFFICER FRANK HIAHARA

FORMER MAYOR OF BIRMSON READN PRESLEY

CITY OF HOLLISTER MISSOURI

OFFICER JASON FLOWERS (HOLLISTER MISSOUR)

BPD SGT GREEN

HOLLISTER POLICE CHEIF

BPD. OFFICER GAMBLE

I. The Parties to This Complaint

A.	The	Plain	tiff(s)
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Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	JAMES AARON LOWE
All other names by	which you have been known:
ID Number	03545
Current Institution	TANRY COUNTY JAIL
Address	RO. Box 1005
	FORSYTH MO

B. The Defendant(s)

- Provide the information below for each defendant named in the complaint, whether the
 defendant is an individual, a government agency, an organization, or a corporation.
- Make sure that the defendant(s) listed below are identical to those contained in the above caption.
- For an individual defendant, include the person's job or title (if known) and check whether
 you are bringing this complaint against them in their individual capacity or official capacity,
 or both.
- Attach additional pages if needed.

Name

Name

BRAUSON POLICE CHIE

(if known)

Shield Number

Employer

Address

IND W. MADDUX ST

BRAUSON NO 65616

Individual capacity

Official capacity

	Defendant No. 2	
	Name	TRAUIS ROSS
	Job or Title (if known)	POLICE OFFICER
	Shield Number	
	Employer	CITY OF BRANSON
	Address	110 La MADDUX ST
	7 tuul vaa	RRANSON MO (5616
	Individual cap	<u> </u>
Bas	sis for Jurisdiction	
priv <i>Unk</i>	ileges, or immunities secured b	•
	Federal officials (a I	Bivens claim)
	State or local officia	Is (a § 1983 claim)
В.	immunities secured by the Co	lleging the "deprivation of any rights, privileges, or onstitution and [federal laws]." 42 U.S.C. § 1983. may only recover for the violation of certain
	What federal constitutional ostate or local officials?	or statutory right(s) do you claim is/are being violated by
	ASSULT, HAS	MSSNEUT, DEPRIVATION T, RIGHT TO FAIR TRIAL

II.

Unknown Badge It

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III. Prisoner Status

	Indicate whether you are a prisoner or other confined person as follows (check all that apply):
	Pretrial detainee
	Civilly committed detainee
	Immigration detainee
	Convicted and sentenced state prisoner
	Convicted and sentenced federal prisoner
	Other (explain)
IV.	Statement of Claim
	Write a short and plain statement of FACTS that support your claim. Do not make legal arguments. You must include the following information:
	• What happened to you?
	What injuries did you suffer?
	Who was involved in what happened to you?
	 How were the defendants involved in what happened to you?
	Where did the events you have described take place?
	 When did the events you have described take place?
	If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.
	None and a relacitie to the Time
	Donot about 10/2019 to officer Waris
	Maliteously arrulted the by Taying
	Me. This officer on Multipul Occations
	has threatend and honored Mr. Video
	evidence of this toning of the Dest was
_	Tompered with by the audio portion of the Video being deleted resulting in
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ly	2 not being are we defend legalist
00	case 6.16-cv-03385-MDH Document 1 Filed 09/19/16 Page 6 of 16

assertion that officer traver Ross as well as SGT Lugsberry and others Conspired to Comper with evedente in order to Cover up on wrong doing by the Brans Police Department as Well as Manufix Re evedence to support criminal charge brought against Me. 2) on or about 5/2016 SGT Kingsberry Police Department / Knowingly omtel Critical evedence from a Witness Statement in a Phobable Course report to the Taney Country Prosecuters office in order to have charges brought against Na. Charges Were Wought the I was arrested and charged with a felony that was fater dismissed at the Preterminary Hearing after the omittee evedence was heared by Judge waters of the state of /Alssouli. 3) on an about 3/20/4 officer Calib tree of the Brandon Police Department wought factions Charges coainst me in order to harross and Theaten the At the end of the interopation the Tea ask of the interopation the faw Suit assimst Early to drop My Civel faw Suit assimst Spender of the interopation of the in

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state	
what medical treatment, if any, you required and did or did not receive.	
Physical Indiese Genturting, Pain	
It ask for the thought that ment and	
vas deh sid.	
Loss of Liberties, Loss of Personal	1
Positions due to cintaules	_
chicartoration. Harrassmoht and	•
tellamation of Caractar.	1
defermation /	

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

The damage of the acts alleged and the basis for these claims.

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The damage of the acts alleged and the basis for these claims.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
В.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes No Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes No Do not know
	If yes, which claim(s)?
D.	Did you file a grievance in the jail, prison, or other correctional facility where your
	claim(s) arose concerning the facts relating to this complaint? Yes
	No

	no, did you file a grievance about the events described in this complaint at any other, prison, or other correctional facility?
	Yes No
E. If y	ou did file a grievance:
1.	Where did you file the grievance?
2.	What did you claim in your grievance? (Attach a copy of your grievance, if available)
3.	What was the result, if any? (Attach a copy of any written response to your grievance, if available)
4.	What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

If there are any reasons why you did not file a grievance, state them here:
If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
et forth any additional information that is relevant to the exhaustion of your rative remedies.

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?



inv	ve you filed other lawsuits in state or federal court dealing with the same facts olved in this action? Yes No
belo	your answer to A is yes, describe each lawsuit by answering questions 1 through ow. (If there is more than one lawsuit, describe the additional lawsuits on another, using the same format.)
1.	Parties to the previous lawsuit
	Plaintiff(s)
	Defendant(s)
2.	Court (if federal court, name the district; if state court, name the county and State)
3.	Docket or index number
4.	Name of Judge assigned to your case
5.	Approximate date of filing lawsuit
6.	Is the case still pending?

	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
C.		e you filed other lawsuits in state or federal court otherwise relating to the litions of your imprisonment? Yes No
D.	belov	our answer to C is yes, describe each lawsuit by answering questions 1 through 7 w. (If there is more than one lawsuit, describe the additional lawsuits on another, using the same format.)
	1.	Parties to the previous lawsuit
		Plaintiff(s) Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending? Yes No (If no, give the approximate date of disposition):

7.	What was the result of the case? (For example: Was the case dismissed? Was-judgment entered in your favor? Was the case appealed?)

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 8/27, 2016.

Signature of Plaintiff
Printed Name of Plaintiff
Prison Identification #
Prison Address
City State Zip Code

JAMES AARON LOWE 03545 P.O. BOX 190 FORSYTH MO 65653

STAMPS A LOWE H 03545 x (005 ALL DONG BY HAWKERDS BKELL LOO U.S, COURTHOUSE SPRINGFIELD MO DISTRICT COR SEP 1 9 2016